

Fill in this information to identify the case:

Debtor name Shoreview Holding LLC  
United States Bankruptcy Court for the: Western District of Texas  
(State)  
Case number (If known): 25-10566

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>65,170,000</u>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>67,426,605.18</u>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>67,426,605.18</u>

Part 2: Summary of Liabilities

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>51,100,000</u>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>0</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+ \$ <u>211,999.99</u>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>51,311,999.99</u>

**Fill in this information to identify the case:**Debtor name Shoreview Holdings LLCUnited States Bankruptcy Court for the: Western District of Texas  
(State)Case number (if known): 25-10566☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1:** Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

\$ \_\_\_\_\_

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. Flagstar Bank	DACA	9926	\$ 478,394.62 as of 4/24/2025
3.2. Wells Fargo	CMA (lender controlled)	7313	\$ 1,218,969.29

**4. Other cash equivalents (Identify all)**

Description, including name of holder of deposit	Type of account	Last 4 digits of account number	Current value of debtor's interest
4.1. Bank of America	Operating Account	6881	\$ 18,460.81
4.2. Bank of America	Tenant Security Deposit	6894	\$ 59781.50

**5. Total of Part 1**

\$ 1,775,606.22

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2:** Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes. Fill in the information below.

**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit	Current value of debtor's interest
7.1. _____	\$ _____
7.2. Utility Deposit	\$ 22,742.00

Debtor

Shoreview Holdings LLC

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Case number (if known) 25-10566

Name

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. Prepaid Insurance 4/30/25 BS	\$ 167,336.05
8.2. Prepaid Expenses	\$ 2520.42

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

<b>\$ 192,598.47</b> as of 04/24/2025
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**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes. Fill in the information below.

**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less:	_____	-	_____	= ..... →	\$ .49
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	0.00	-	_____	= ..... →	\$ 0
	face amount		doubtful or uncollectible accounts		

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ .49
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**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the information below.

**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. _____	_____ %	_____	\$ _____
15.2. _____	_____ %	_____	\$ _____

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ _____
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Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.  
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
23. Total of Part 5				

24. Is any of the property listed in Part 5 perishable?

- ☐ No  
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No  
☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
29. Farm animals Examples: Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

34. **Is the debtor a member of an agricultural cooperative?**

- ☐ No  
☐ Yes. Is any of the debtor's property stored at the cooperative?  
☐ No  
☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No  
☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No  
☐ Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

**Part 7:** Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture</b>			
_____	\$ _____	_____	\$ _____
40. <b>Office fixtures</b>			
_____	\$ _____	_____	\$ _____
41. <b>Office equipment, including all computer equipment and communication systems equipment and software see attached list</b>		fair market value	\$ 273,400
_____	\$ _____	_____	_____
42. <b>Collectibles</b> <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 273,400

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No  
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
<b>48. Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
<b>49. Aircraft and accessories</b>			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
<b>50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
Trash Compactor Model ACE E 34 '2020	\$ _____	fair market value	\$ 15,000.00
<b>51. Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.			\$ 15,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 1161 3rd Ave E Bradenton, FL 34208	TIC owner	\$ 68,600,000	BOV	\$ 95%
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 65,170,000

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No  
☒ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ — \_\_\_\_\_ = ➔ \$ \_\_\_\_\_  
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\_\_\_\_\_ \$ \_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\_\_\_\_\_ \$ \_\_\_\_\_

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 0

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No  
☐ Yes



Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 1,775,606.22	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 192,598.47	
82. Accounts receivable. Copy line 12, Part 3.	\$ .49	
83. Investments. Copy line 17, Part 4.	\$ 0	
84. Inventory. Copy line 23, Part 5.	\$ 0	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 273,400	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 15,000.00	
88. Real property. Copy line 56, Part 9. . . . .	→	\$ 65,170,000
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0	
90. All other assets. Copy line 78, Part 11.	+ \$ 0	
91. Total. Add lines 80 through 90 for each column. . . . . 91a.	\$ 67,426,605.18	+ 91b. \$ 0
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. . . . .	\$ 67,426,605.18	

**Fill in this information to identify the case:**

Debtor name SHOREVIEW HOLDING LLC  
 United States Bankruptcy Court for the: WESTERN District of TEXAS  
 (State)  
 Case number (If known): 25-10566

☐ Check if this is an amended filing

**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

**2.1 Creditor's name****Describe debtor's property that is subject to a lien**

PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC

MULTI-FAMILY REAL ESTATE

\$ 51,100,000

\$ 68,600,000

**Creditor's mailing address**

155 N. WACKER DR STE 3600  
 CHICAGO, IL 60606

**Describe the lien**

MORTGAGE LIEN

**Creditor's email address, if known****Is the creditor an insider or related party?**

- ☒ No  
☐ Yes

Date debt was incurred 12/15/2021**Is anyone else liable on this claim?**

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number 0378**Do multiple creditors have an interest in the same property?**

- ☒ No  
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**2.2 Creditor's name****Describe debtor's property that is subject to a lien**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Creditor's mailing address****Describe the lien****Creditor's email address, if known****Is the creditor an insider or related party?**

- ☐ No  
☐ Yes

Date debt was incurred \_\_\_\_\_

**Is anyone else liable on this claim?**

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number \_\_\_\_\_

**Do multiple creditors have an interest in the same property?**

- ☐ No  
☐ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

\$ 51,100,000

Debtor

SHOREVIEW HOLDING LLC

39

Case number (if known)

25-10566

Name

## Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.</b> <b>Creditor's name</b>  <b>Creditor's mailing address</b>   <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.   <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b>    <b>Describe the lien</b>   <b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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<b>2.</b> <b>Creditor's name</b>  <b>Creditor's mailing address</b>   <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.   <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b>    <b>Describe the lien</b>   <b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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**Part 2:** List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

**If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.**

[illegible]

**Fill in this information to identify the case:**

Debtor Shoreview Holding LLC

United States Bankruptcy Court for the: Western District of Texas  
(State)

Case number 25-10566  
(If known)

☐ Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1:** List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.  
☐ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_

**Total claim****Priority amount**

\$ \_\_\_\_\_

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

**2.2** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

**2.3** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_ \$ \_\_\_\_\_

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address 4 Walls Inc. P.O. Box 248 Narberth, PA 19072</p> <p>Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 1,196.00 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address Alert 360 2448 E 81st St - 42nd Floor Tulsa, OK 74137-4330</p> <p>Date or dates debt was incurred Nov 2024 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 197.79 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address Ally Waste Services, LLC 2509 S. Power Rd, Ste 101 325 S Higley Rd, Ste 120 Gilbert, AZ 85296 Gilbert, AZ 85296</p> <p>Date or dates debt was incurred Sep 2024 - Apr 2025 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 13,117.33 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address Audio Video Partners LLC 6301 Porter Rd, Suite 8 Sarasota, FL 34240</p> <p>Date or dates debt was incurred Jan 2025 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 1,475.99 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address Camp Construction Services 15139 S Post Oak Rd Houston, TX 77053</p> <p>Date or dates debt was incurred Feb - Mar 2025 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 950.00 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address Casoro Group 9050 N. Capital of TX Hwy, Suite 320 Austin, TX 78759</p> <p>Date or dates debt was incurred Jan - Feb 2025 Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: \$ 6,860.01 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address Century/AAA DBA: AAA Supply  590 West 84 Street Hialeah, FL 33014  Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,675.81 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Chadwell Supply, Inc.  PO Box 105172 5115 Joanne Kearny Blvd Atlanta, GA 30348 Tampa, FL 33619  Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 3,410.02 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Cintas Fire Protection (Cintas Corporation)  6800 Cintas Blvd PO Box 636525 Mason, OH 45263 Cincinnati, OH 45263  Date or dates debt was incurred Feb - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 10,616.78 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address CommTow (CommTow LLC)  4821 US Hwy 19 1301 29th Ave W Palmetto, FL 34221 Bradenton, FL 34205  Date or dates debt was incurred Nov 2024 - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 75.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Controlled Entry Distributors, Inc Dba Community Controls  2480 Sount 3850 West, Suite A Salt Lake City, UT 84120  Date or dates debt was incurred Jan - Feb 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 240.75 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes



Part 2: Additional Page

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Amount of claim

3.12	Nonpriority creditor's name and mailing address CoStar Realty Information, Inc.  2563 Collection Center Dr Chicago, IL 60693  Date or dates debt was incurred June - Sep 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 8,076.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address CredBuild  1101 W 34th St 1809 Pearl St Austin, TX 78705 Austin, TX 78701  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 84.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Crown Roofing LLC  240 Field End St Sarasota, FL 34240  Date or dates debt was incurred Nov 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 4,878.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address EPLUS Services LLC  30103 Skylark Dr Wesley Chapel, FL 33545  Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 2,700.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Ferguson Enterprises, Inc.  12500 Jefferson Ave Newport News, VA 23602  Date or dates debt was incurred Jan - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 779.12 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

3.17	Nonpriority creditor's name and mailing address Flanagan Bilton, LLC  1 N La Salle St, Ste 2100 Chicago, IL 60602  Date or dates debt was incurred Feb - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 28,126.21 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Sherwin Williams (Flooring)  101 W Prospect Ave Cleveland, OH 44115  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 7,086.59 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address GE Appliances  4000 Buechel Bank Rd PO Box 640025 Louisville, KY 40225 Pittsburgh, PA 15264  Date or dates debt was incurred Nov 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 753.59 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address Glass Doctor of Tampa Bay  PO Box 271429 Tampa, FL 33688  Date or dates debt was incurred Jan 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 872.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Group Fenix LLC  9024 Hogans Bend Tampa, FL 33647  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 8,515.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

3.22	Nonpriority creditor's name and mailing address HD Supply Facilities Maintenance, LTD.  3400 Cumberland Blvd SE Atlanta, GA 30339  Date or dates debt was incurred Jan - Mar 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,388.78 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Horticultural Management Industries  PO Box 1374 Brandon, FL 33509  Date or dates debt was incurred Feb - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,581.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address I4 Waste Valet & Recycling "L.L.C"  7802 Kingspointe Pkwy 209 Orlando, FL 32819  Date or dates debt was incurred Jun - Jul 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 800.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address ICO Companies, Inc. DBA ICO Uniforms  1605 NW 159 St Miami Gardens, FL 33169  Date or dates debt was incurred Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 91.59 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address JobCall, Inc.  630 Bridgepoint Pkwy, Suite 500 Austin, TX 78730  Date or dates debt was incurred Nov 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 762.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

3.27	Nonpriority creditor's name and mailing address Kings III of America, Inc.  751 Canyon Dr, Suite 100 Coppell, TX 75019  Date or dates debt was incurred Last 4 digits of account number	Dec 2024 _____ _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,088.73
3.28	Nonpriority creditor's name and mailing address Landlord Legal P.A.  927 Washington St Hollywood, FL 33019  Date or dates debt was incurred Last 4 digits of account number	Jan 2025 _____ _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,003.00
3.29	Nonpriority creditor's name and mailing address Leaselock Insurance Services, Inc.  5050 Quorum Dr, Suite 700 Dallas, TX 75254  Date or dates debt was incurred Last 4 digits of account number	Apr 2025 _____ _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,532.32
3.30	Nonpriority creditor's name and mailing address Leaselock, Inc.  480 Washington Blvd Marina Del Ray, CA 90292  Date or dates debt was incurred Last 4 digits of account number	Apr 2025 _____ _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 611.51
3.31	Nonpriority creditor's name and mailing address LIVunLtd (Fomer Heartline Fitness Systems)  7520 Standish Pl, Suite 250 Rockville, MD 20855  Date or dates debt was incurred Last 4 digits of account number	Nov 2024 - Apr 2025 _____ _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,050.00

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Amount of claim

332	Nonpriority creditor's name and mailing address <u>Matrix Turnkey, Inc.</u>  <u>PO Box 4124</u> <u>Brandon, GL 33509</u>	As of the petition filing date, the claim is: <u>\$ 5,358.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Date or dates debt was incurred <u>Jan - Apr 2025</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
333	Nonpriority creditor's name and mailing address <u>McCarthy, Rose &amp; Mills, LLP</u>  <u>3001 Dallas Pkwy Suite 750</u> <u>Frisco, TX 75034</u>	As of the petition filing date, the claim is: <u>\$ 15,150.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Date or dates debt was incurred <u>Apr 2025</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
334	Nonpriority creditor's name and mailing address <u>Elise AI Technologies Corp DbA MeetElise</u>  <u>PO Box 8084</u> <u>Carol Stream, IL 60197</u>	As of the petition filing date, the claim is: <u>\$ 2,138.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Date or dates debt was incurred <u>Jan - Apr 2025</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
335	Nonpriority creditor's name and mailing address <u>Michael's Fence</u>  <u>2523 W Knollwood St</u> <u>Tampa, FL 33614</u>	As of the petition filing date, the claim is: <u>\$ 6,550.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Date or dates debt was incurred <u>Mar 2025</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
336	Nonpriority creditor's name and mailing address <u>National Apartment Association</u>  <u>PO Box 716450</u> <u>Philadelphia, PA 19171</u>	As of the petition filing date, the claim is: <u>\$ 1,103.84</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Date or dates debt was incurred <u>Mar 2025</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

337	Nonpriority creditor's name and mailing address National Exemption Service, LLC  604 Packard Court, Suite A Safety Harbor, FL 34695  Date or dates debt was incurred June 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 387.96 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
338	Nonpriority creditor's name and mailing address Not1bug Pest Solutions  4880 Windsor Landing Unit 109 Fort Meyers, FL 33966  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 673.92 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
339	Nonpriority creditor's name and mailing address Parcel Pending, Inc.  PO Box 123689, Dept 3689 Dallas, CA 75312  Date or dates debt was incurred Dec 2024 - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 679.03 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
340	Nonpriority creditor's name and mailing address Precision Gate & Security, Inc.  350 W Venice Ave. #153 Venice, FL 34285  Date or dates debt was incurred Feb 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 5,123.21 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
341	Nonpriority creditor's name and mailing address ProofUp  1101 W 34th St, PO Box 301 Austin, TX 78705  Date or dates debt was incurred Apr 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 326.60 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

342	Nonpriority creditor's name and mailing address Radix Software, Inc.  7150 E Camelback Rd Suite 333 Scottsdale, AZ 85215  Date or dates debt was incurred Nov 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 658.80 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
343	Nonpriority creditor's name and mailing address Rentable  PO Box 7640 Madison, WI 53707  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 124.89 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
344	Nonpriority creditor's name and mailing address ResMan LLC  2035 Lakeside Centre Way, Ste 250 Knoxville, TN 37922  Date or dates debt was incurred March 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 117.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
345	Nonpriority creditor's name and mailing address Right Way Elevator Maintenance  9790 16th St North St St. Petersburg, FL 33716  Date or dates debt was incurred Dec 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 6,201.47 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
346	Nonpriority creditor's name and mailing address SafeRent Solutions, LLC  4600 Regent Blvd, Ste 150 Irvine, TX 75063  Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 759.82 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

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Amount of claim

347	Nonpriority creditor's name and mailing address Same Day Plumbng & Air Professional Corp  4813 73rd st E Palmetto, FL 34221  Date or dates debt was incurred Jan - Feb 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,428.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
348	Nonpriority creditor's name and mailing address Sapphire Cleaning LLC  1014 24th St E Palmetto, FL 34221  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 13,210.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
349	Nonpriority creditor's name and mailing address Sprinklermatic Fire Protection Systems, Inc.  4740 Davie Rd Davie, FL 33314  Date or dates debt was incurred Dec 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,590.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
350	Nonpriority creditor's name and mailing address Staples Business Advantage  PO Box 660409 Dallas, TX 75266  Date or dates debt was incurred Dec 2024 - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 584.56 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
351	Nonpriority creditor's name and mailing address Street Digital Media LLC  1008 Burnside Ln NW Atlanta, GA 30318  Date or dates debt was incurred Feb - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 3,750.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes



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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

352	Nonpriority creditor's name and mailing address Superpool Services  PO Box 110393 Bradenton, FL 34211  Date or dates debt was incurred Jan - Mar 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 2,049.00 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
353	Nonpriority creditor's name and mailing address The Sherwin Williams Company  PO Box 277499 Atlanta, GA 30384  Date or dates debt was incurred Jan - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 1,701.76 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
354	Nonpriority creditor's name and mailing address Tower Compactor Rentals, LLC  6910 E. Chauncey Ln Suite 130 ***21040 N Pima Rd, Scottsdale, AZ 85255  Date or dates debt was incurred Nov 2024 - Apr 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 3,691.25 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
355	Nonpriority creditor's name and mailing address Valet Living, LLC  Dept 9791, PO Box 850001 Orlando, FL 32885  Date or dates debt was incurred Feb - Sep 2024 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 11,572.56 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
356	Nonpriority creditor's name and mailing address Bryant Maxwell    Date or dates debt was incurred Jun 2021 - Jun 2025 Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ 250.00 Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

357	Nonpriority creditor's name and mailing address Molly Lipovsky	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 750.00
Date or dates debt was incurred Jul 2024 - Jul 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
358	Nonpriority creditor's name and mailing address Secilia Rujawitz/Tara Rujawitz	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 250.00
Date or dates debt was incurred Dec 2022 - May 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
359	Nonpriority creditor's name and mailing address Maria Leon	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 750.00
Date or dates debt was incurred May 2024 - May 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
360	Nonpriority creditor's name and mailing address Nancy and Robert Brown	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 250.00
Date or dates debt was incurred Oct 2021 - Jul 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
361	Nonpriority creditor's name and mailing address Jennifer Evans and Salvador Rubio	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 750.00
Date or dates debt was incurred Nov 2023 - Aug 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

362	Nonpriority creditor's name and mailing address Evan Pilachowski and Jessica Strand   	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____	\$ 750.00
	Date or dates debt was incurred <u>Mar 2024 - Jul 2025</u> Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
363	Nonpriority creditor's name and mailing address Ambreen Haider and Joshua Kindler   	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____	\$ 500.00
	Date or dates debt was incurred <u>Jun 2023 - Jun 2025</u> Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
364	Nonpriority creditor's name and mailing address Sami Osman   	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____	\$ 750.00
	Date or dates debt was incurred <u>May 2024 - Jun 2025</u> Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
365	Nonpriority creditor's name and mailing address Aagna Patel   	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____	\$ 2,144.00
	Date or dates debt was incurred <u>Jun 2024 - Jun 2025</u> Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
366	Nonpriority creditor's name and mailing address Kelly Steward   	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____	\$ 2,084.00
	Date or dates debt was incurred <u>Mar 2024 - Jun 2025</u> Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

367	Nonpriority creditor's name and mailing address Olivia Fulton	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 750.00
Date or dates debt was incurred Sep 2024 - May 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
368	Nonpriority creditor's name and mailing address Ryan Julius	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 750.00
Date or dates debt was incurred May 2024 - Jun 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
369	Nonpriority creditor's name and mailing address Linda Kline and James Robinson	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 750.00
Date or dates debt was incurred Jul 2023 - May 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
370	Nonpriority creditor's name and mailing address Amanda Wirth and Connor Raible	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,247.00
Date or dates debt was incurred Feb 2025 - Dec 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
371	Nonpriority creditor's name and mailing address Peter Dowd, Meghan Springer, Lisa Springer-Dowd	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 250.00
Date or dates debt was incurred Jan 2023 - Jul 2025		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2:

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.		Amount of claim
372	<div>Nonpriority creditor's name and mailing address</div> <div>Carol Brown</div> <div></div> <div></div> <div></div> <div></div> <div>Date or dates debt was incurred</div> <div>Feb 2025 - Sep 2025</div> <div>Last 4 digits of account number</div> <div></div>	<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div><input checked="" type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div><input type="checkbox"/> Liquidated and neither contingent nor disputed</div> <div>Basis for the claim:</div> <div></div> <div>Is the claim subject to offset?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> <div>\$ 750.00</div>
373	<div>Nonpriority creditor's name and mailing address</div> <div>Lori Boykin and Robert Forney</div> <div></div> <div></div> <div></div> <div></div> <div>Date or dates debt was incurred</div> <div>Jul 2023 - Jul 2025</div> <div>Last 4 digits of account number</div> <div></div>	<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Basis for the claim:</div> <div></div> <div>Is the claim subject to offset?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> <div>\$ 750</div>
3	<div>Nonpriority creditor's name and mailing address</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div>Date or dates debt was incurred</div> <div></div> <div>Last 4 digits of account number</div> <div></div>	<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Basis for the claim:</div> <div></div> <div>Is the claim subject to offset?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> <div>\$</div>
3	<div>Nonpriority creditor's name and mailing address</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div>Date or dates debt was incurred</div> <div></div> <div>Last 4 digits of account number</div> <div></div>	<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Basis for the claim:</div> <div></div> <div>Is the claim subject to offset?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> <div>\$</div>
3	<div>Nonpriority creditor's name and mailing address</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div>Date or dates debt was incurred</div> <div></div> <div>Last 4 digits of account number</div> <div></div>	<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Basis for the claim:</div> <div></div> <div>Is the claim subject to offset?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> <div>\$</div>

Part 3:

List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Part 3: Additional Page for Others to Be Notified About Unsecured Claims

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$ 0
5b. Total claims from Part 2	5b. +	\$ 211,999.99
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 211,999.99



## Fill in this information to identify the case:

Debtor name Shoreview Holding LLC

United States Bankruptcy Court for the: Western District of Texas  
(State)

Case number (If known): 25-10566 Chapter

☐ Check if this is an amended filing

## Official Form 206G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Alarm Monitoring	Alert360 2448 E 81st St #4200 Tulsa, OK 74137
	State the term remaining	N/A	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	Valet Trash Service	Ally Waste Services 2509 S. Power Rd, Ste 101 Gilbert, AZ 85296
	State the term remaining	75 months	
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	Fire Protection Services	Cintas Fire Protection 9318 Florida Palm Dr (Location F32) Tampa, FL 33619
	State the term remaining	N/A	
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest	Emergency Pool Phones	Kings III Emergency Communications 751 Canyon Dr, Ste 100 Coppell, TX 75019
	State the term remaining	N/A	
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest	Utility Expense Management	National Exemption Service, LLC 604 Packard Court, Suite A Safety Harbor, FL 34695
	State the term remaining	N/A	
	List the contract number of any government contract		

Debtor Shoreview Holding LLC  
NameCase number (if known) 25-10566

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

## List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

26	State what the contract or lease is for and the nature of the debtor's interest	Pest Control	Not1bug Pest Solutions
	State the term remaining	N/A	4880 Windsor Landing, Unit 109
	List the contract number of any government contract		Fort Meyers, FL 33966
27	State what the contract or lease is for and the nature of the debtor's interest	Package Management	Parcel Pending, Inc
	State the term remaining	N/A	478 Wheelers Farms Rd
	List the contract number of any government contract		Millford, CT 06461
28	State what the contract or lease is for and the nature of the debtor's interest	Revenue Management	RealPage
	State the term remaining		2201 Lakeside Blvd
	List the contract number of any government contract		Richardson, TX 75082
29	State what the contract or lease is for and the nature of the debtor's interest	Compactor	Tower Compactor Rentals, LLC
	State the term remaining	5 months	6910 E Chauncey Lane Suite 130
	List the contract number of any government contract		Phoenix, AZ 85054
210	State what the contract or lease is for and the nature of the debtor's interest	Property Management	ResProp Management Company LLC
	State the term remaining	N/A	1101 W 34th St, #323
	List the contract number of any government contract		Austin, TX 78705
211	State what the contract or lease is for and the nature of the debtor's interest	Asset Management	Casoro Group
	State the term remaining	N/A	9050 N Capital of TX Hwy, Suite 320
	List the contract number of any government contract		Austin, TX 78759
212	State what the contract or lease is for and the nature of the debtor's interest	Mortgage Broker Agreement	Northmarq
	State the term remaining	N/A	8343 Douglas Ave, Suite 600
	List the contract number of any government contract		Dallas, TX 75225

Debtor Shoreview Holding LLC  
NameCase number (if known) 25-10566

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

## List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.13	State what the contract or lease is for and the nature of the debtor's interest	Landscaping	Jimaguas Landscaping and Tree Service
	State the term remaining	N/A	
	List the contract number of any government contract		
2.14	State what the contract or lease is for and the nature of the debtor's interest	Google Advertising	Street Digital Media LLC 1008 Burnside Ln NW Atlanta, GA 30318
	State the term remaining	N/A	
	List the contract number of any government contract		
2.15	State what the contract or lease is for and the nature of the debtor's interest	Property Tax Protest Live Local Program Application	Flanagan Bilton, LLC One North LaSalle Street, Suite 2100 Chicago, IL 60602
	State the term remaining		
	List the contract number of any government contract		
2.16	State what the contract or lease is for and the nature of the debtor's interest	Common Area/Office Electric	Florida Power & Light (FPL) PO Box 025576 Miami, FL 33102
	State the term remaining	N/A	
	List the contract number of any government contract		
2.17	State what the contract or lease is for and the nature of the debtor's interest	Natural Gas	Gas South 788 Circle 75 Pkwy Atlanta, GA 30339
	State the term remaining	N/A	
	List the contract number of any government contract		
2.18	State what the contract or lease is for and the nature of the debtor's interest	Water/Trash	City of Bradenton 101 12th St W Bradenton, FL 34205
	State the term remaining	N/A	
	List the contract number of any government contract		
2.19	State what the contract or lease is for and the nature of the debtor's interest	Gas	TECO Energy, Inc. 1898 Nuccio Pkwy Tampa, FL 33605
	State the term remaining	N/A	
	List the contract number of any government contract		

Debtor Shoreview Holding LLC Case number (if known) 25-10566  
 Name \_\_\_\_\_

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

20	State what the contract or lease is for and the nature of the debtor's interest	Office Phone/Internet	Charter Communications, Inc
	State the term remaining	N/A	400 Washington Blvd
	List the contract number of any government contract		Stamford, CT 06902
21	State what the contract or lease is for and the nature of the debtor's interest	Property Management Software	ResMan
	State the term remaining	N/A	2901 Dallas Pkwy #200
	List the contract number of any government contract		Plano, TX 75093
22	State what the contract or lease is for and the nature of the debtor's interest	Virtual Leasing Agent	Elise A.I Technologies Corp.
	State the term remaining	N/A	33 E 33rd St, 2nd Floor
	List the contract number of any government contract		New York, NY, 10016
23	State what the contract or lease is for and the nature of the debtor's interest	Elevator Maintenance	Right Way Elevator Maintenance
	State the term remaining	12 months	1343 Main Street, Suite 300
	List the contract number of any government contract		Sarasota, FL 34236
24	State what the contract or lease is for and the nature of the debtor's interest	Fitness Equipment Maintenance	LIVunLtd (Fomer Heartline Fitness Systems)
	State the term remaining	N/A	9 E 40th St 7th SI
	List the contract number of any government contract		New York, NY 10016
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

## Fill in this information to identify the case:

Debtor name SHOREVIEW HOLDING LLC

United States Bankruptcy Court for the: WESTERN District of TEXAS  
(State)

Case number (If known): 25-10566

☐ Check if this is an amended filing

## Official Form 206H

## Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

## 1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 <u>PLF SHOREVIEW LLC</u>	<u>9050 N. CAPITAL TEXAS HWY 320</u> Street <u>AUSTIN, TX 78759</u> City State ZIP Code	<u>PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 <u>MDW SHOREVIEW LLC</u>	<u>9050 N. CAPITAL TEXAS HWY 320</u> Street <u>AUSTIN, TX 78759</u> City State ZIP Code	<u>PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 <u>MONTE LEE-WEN</u>	<u>9050 N. CAPITAL TEXAS HWY 320</u> Street <u>AUSTIN, TX 78759</u> City State ZIP Code	<u>PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 <u>PAUL FEIKEMA &amp; LAUREN FEIKEMA</u>	<u>8820 17TH AVENUE CIRCLE NW</u> Street <u>BRADENTON, FL 34209</u> City State ZIP Code	<u>PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 <u>MEISHA WILSON</u>	<u>1813 MANATEE AVE WEST</u> Street <u>BRADENTON, FL 34205</u> City State ZIP Code	<u>PRIME FINANCE SHORT DURATION HOLDING COMPANY VII, LLC</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor

SHOREVIEW HOLDING LLC

Name

Case number (if known) 25-10566

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.____ _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	

**Fill in this information to identify the case and this filing:**

Debtor Name Shoreview Holding LLC  
United States Bankruptcy Court for the: Western District of Texas  
(State)  
Case number (If known): 25-10566

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/23/2025  
MM / DD / YYYY

x   
Signature of individual signing on behalf of debtor

Monte Lee-Wen

Printed name

Manager

Position or relationship to debtor